



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

FILED

07 FEB -8 PM 4:22

**CANDIDATE COMMITTEE
COVER PAGE**

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

CARINELLA SABAUGH
MACOMB COUNTY CLERK

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 3. This Statement Covers From <u>1-1-06</u> to <u>12-31-06</u> | |
| 4. Candidate Last Name HAWATMEH | First Name NICOLA |
| 4a. Office Sought Including District # or Community Servid (if applicable) | |
| 4b. County of Residence | |
| 6. Treasurer's Name & Residential Address Nicola Hawatmeh 32047 Vegas Dr Warren, MI 48093 | |
| Area Code & Phone 586 871-6522 | |
| 8. Designated Record keeper's Name and Mailing Address (if the committee has a Designated Record keeper) Nicola Hawatmeh 32047 Vegas Dr. Warren, MI 48093 | |
| Area Code and Phone 586 871-6522 | |

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

5. Committee's Mailing Address

32047 Vegas Dr
Warren, MI 48093

Area Code and Phone

586 87-6522

If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.

7. Treasurer's Business Address

SAME

Area Code and Phone

9. TYPE OF STATEMENT

9a. ☐ Pre-Election

OR

9b. ☒ Post-Election

Pre-Election or Post-Election Statement relates to:

☐ Primary

☐ Convention

☐ Special

☐ General

☐ School

☐ Caucus

Date of Election, Convention or Caucus

9c. ☒ Annual Statement (2006 Coverage Year)

9d. ☐ Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)

9e. ☐ Dissolution of Candidate Committee

Effective Date of Dissolution

By checking this item, I/We certify that the committee has no assets or outstanding debts, including late filing fees. Further, I/We request that if the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.

Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.

A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement cannot be waived.

10. Verification: I/We certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my/our knowledge and belief the contents are true, accurate and complete.

Current Treasurer or

Designated Record keeper

Type or Print Name

Signature

Date

Candidate

Type or Print Name

Signature

Date



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**SUMMARY PAGE
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicole Hawatmeh

| RECEIPTS | | Column I This Period | Column II Cumulative this election cycle |
|-------------------------------------------------------------------------------------------------|------------|-------------------------|---------------------------------------------|
| 3. Contributions | | | |
| a. Itemized (Schedule 1A - Column 6) | (3a.) \$ | <u>2300.37</u> | |
| b. Unitemized (less than \$20.01 each - no Schedule) | (3b.) \$ | <u>NOT APPLICABLE</u> | |
| c. Subtotal of "Contributions" | (3c.) \$ | <u>2300.37</u> | (18.) \$ |
| 4. Other Receipts (Schedule 1A -1, Column 6) | (4.) \$ | | (19.) \$ |
| 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4) | (5.) \$ | <u>2300.37</u> | (20.) \$ |
| IN-KIND CONTRIBUTIONS & EXPENDITURES | | | |
| 6. In-Kind Contributions (Schedule 1-IK, Column 7) | (6.) \$ | | (21.) \$ |
| 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) | (7.) \$ | | (22.) \$ |
| EXPENDITURES | | | |
| 8. Expenditures | | | |
| a. Itemized (Schedule 1B, Column 6) | (8a.) \$ | <u>1059.00</u> | |
| b. Itemized Get-Out-the-Vote (Schedule 1B-G) | (8b.) \$ | | |
| c. Unitemized (less than \$50.01 each - no Schedule) | (8c.) \$ | | |
| 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) | (9.) \$ | <u>1059.00</u> | (23.) \$ |
| INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) | | | |
| 10. Disbursements | | | |
| a. Itemized (Schedule 1C, Column 6) | (10a.) \$ | | |
| b. Unitemized (less than \$50.01 each - no Schedule) | (10b.) \$ | | |
| 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) | (11.) \$ | | (24.) \$ |
| DEBTS AND OBLIGATIONS | | | |
| 12. Debts and Obligations | | | |
| a. Owed by the Committee (Schedule 1E) | (12a.) \$ | | |
| b. Owed to the Committee (Schedule 1E) | (12b.) \$ | | |
| BALANCE STATEMENT | | | |
| 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) | (13.) \$ | <u>126.02</u> | |
| 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) | (14.) + \$ | <u>2300.37</u> | |
| 15. SUBTOTAL Add lines 13 and 14 | (15.) = \$ | <u>2426.39</u> | |
| 16. Amount expended during reporting period (Add lines 9 and 11) | (16.) - \$ | <u>1059.00</u> | |
| 17. ENDING BALANCE (Subtract line 16 from line 15) | (17.) \$ | <u>1367.39</u> | |



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T. E. Nick Hawa-mch

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Mary Kathryn DeCuir

\$ 120.00 \$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Richard Brodie
23500 Sherwood
Warren, MI 48091

\$ 120.00 \$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation

Self Employed

Employer

Click Here for Memo Itemization

Business Address

23500 Sherwood Warren, MI 48091

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Dennis Bucholtz
22332 Cyman
Warren, MI 48091

\$ 120.00 \$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation

Retired

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Harriet Harrington
12009 Diegen Dr
Warren, MI 48093

\$ 20.00 \$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

Page Subtotal

380.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

380.00

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137360

2. Committee Name

C.T.E. Nicol Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Henry Krzystowczyk
11210 Capri Dr
Warren, MI 48093

\$ 120.00 \$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation Retired Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Richard Sulaka
11500 Villa Ct
Warren, MI 48093

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Eugene Sawyer
32332 Cambridge Dr
Warren, MI 48093

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

David Koury
32730 Cambridge Dr.
Warren, MI 48093

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution:

☐ Direct☐ Loan from a person☐ Fund Raiser

Page Subtotal

300.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

680.00

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 137330
2. Committee Name C.T.E Nicola Hawatreh

| Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount. | | | | 6. Amount | 7. Cumulative for Election Cycle for Each Contributor (Through date of receipt) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------|----------------|---------------------------------|---------------------------------------------------------------------------------|
| 3. Contribution #1 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt | <u>4-13-06</u> | | |
| Name & Address: <u>Alan Casmere</u> <u>28836 Panama</u> <u>Warren, MI 48092</u> | | | | \$ <u>100.00</u> | \$ <u>100.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ | | | | Click Here for Memo Itemization | |
| Business Address _____ | | | | | |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | | | |
| 3. Contribution #2 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt | <u>4-13-06</u> | | |
| Name & Address: <u>C.T.E Carolyn Mocer</u> <u>8634 Edna</u> <u>Warren, MI 48093</u> | | | | \$ <u>60.00</u> | \$ <u>60.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ | | | | Click Here for Memo Itemization | |
| Business Address _____ | | | | | |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | | | |
| 3. Contribution #3 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt | <u>4-13-06</u> | | |
| Name & Address: <u>Anthony Aubrey</u> <u>43459 Chardonnay</u> <u>Sterling Hts, MI 48314</u> | | | | \$ <u>240.00</u> | \$ <u>240.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>owner</u> Employer <u>Motor City Pawn</u> | | | | Click Here for Memo Itemization | |
| Business Address <u>22100 Van Dyke Warren 48089</u> | | | | | |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser | | | | | |
| 3. Contribution #4 | PAC Receipt? <input type="checkbox"/> YES | 4. Date of Receipt | <u>4-13-06</u> | | |
| Name & Address: <u>Dean Sanders</u> <u>32102 Vegas Dr</u> <u>Warren, MI 48093</u> | | | | \$ <u>120.00</u> | \$ <u>120.00</u> |
| 5. If over \$100.00 cumulative, please provide: Occupation <u>Retired</u> Employer _____ | | | | Click Here for Memo Itemization | |
| Business Address _____ | | | | | |
| Type of Contribution: <input type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser | | | | | |

Page Subtotal

520.00Grand Total of All Schedules 1A
(Complete on last page of Schedule)1200.00Enter this total on
line 3 of Summary
Page.

MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONSITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C.T. E Nicola Hainwahr

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address:

Jacqueline DeBrowsky
3519 Dallas
Warren, MI 48091

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address:

Dan Melnyk
26727 Newport
Warren, MI 48089

\$ 50.00 \$ 50.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address:

Joe Saleh
13959 Diversion
St Hts, MI 48313

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address:

James Fols
28107 St. Louis Dr
Warren, MI 48092

\$ 60.00 \$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☐ Fund Raiser

Page Subtotal

230.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

1430.00

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137330

2. Committee Name

C.T.E Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1
Name & Address:

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Marvin & Donna Burbary
6027 Point Tremble RD
Algonac, MI 48001

\$ 120.00

\$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation

Administrator

Employer

Mudlodge of St Hts

Click Here for Memo Itemization

Business Address

14151 15 Mile RD, St Hts 48312

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #2
Name & Address:

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Dino Pavidianti
16203 Wilson

\$ 60.00

\$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #3
Name & Address:

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Ron Michals
29535 Palomero
Warren, MI 48093

\$ 20.00

\$ 20.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

Click Here for Memo Itemization

3. Contribution #4
Name & Address:

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Mike & Penny Wiecek
32116 Vegas
Warren, MI 48093

\$ 120.00

\$ 120.00

5. If over \$100.00 cumulative, please provide:

Occupation

Councilman

Employer

Warren

Business Address

5460 Arden, Warren, MI 48092

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

Click Here for Memo Itemization

Page Subtotal

320.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

1750.00

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number

137330

2. Committee Name

C. T. E. Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for
Election Cycle for Each
Contributor (Through
date of receipt)

3. Contribution #1 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address:

Burt Kassab
6695 Arlington Dr
W. Bloomfield, MI 48322

\$ 60.00

\$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #2 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address

Suzanne Sosalla
31526 Hartford Dr
Warren, MI 48088

\$ 60.00

\$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #3 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address:

Summer Anwar
26552 Wagner
Warren, MI 48089

\$ 60.00

\$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

3. Contribution #4 PAC Receipt? ☐ YES

4. Date of Receipt 4-13-06

Name & Address

Saber Kassab
18573 Walmer Ln
Beverly Hills, MI 48025

\$ 100.00

\$ 100.00

5. If over \$100.00 cumulative, please provide:

Occupation _____ Employer _____

Click Here for Memo Itemization

Business Address _____

Type of Contribution: ☐ Direct ☐ Loan from a person ☒ Fund Raiser

Page Subtotal

280.00

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

2030.00

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137330

2. Committee Name

C.T.E. Nicola Hawatmeh

Enter contributor's name and address. If contribution is from an individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC). Report all contributions regardless of amount.

6. Amount

7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)

3. Contribution #1

PAC Receipt?

☐ YES

4. Date of Receipt

4-13-06

Name & Address:

Sue Kattola
5310 Dickson
St Hts, MI 48310

\$ 60.00

\$ 60.00

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☒ Fund Raiser

3. Contribution #2

PAC Receipt?

☐ YES

4. Date of Receipt

1-16-06

Name & Address:

Nicola Hawatmeh
32047 Vegas
warren, MI 48093

\$ 210.37

\$ 210.37

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #3

PAC Receipt?

☐ YES

4. Date of Receipt

Name & Address:

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☐ Fund Raiser

3. Contribution #4

PAC Receipt?

☐ YES

4. Date of Receipt

Name & Address:

\$

\$

5. If over \$100.00 cumulative, please provide:

Occupation

Employer

Click Here for Memo Itemization

Business Address

Type of Contribution:

☐ Direct☐ Loan from a person☐ Fund Raiser

Page Subtotal

270.37

Grand Total of All Schedules 1A
(Complete on last page of Schedule)

2300.37

Enter this total on
line 3 of Summary
Page.



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE

1. Committee I. D. Number

137330

2. Committee Name

C.T.E Nicola Haworth

| 3. Name and address of person or vendor to whom paid | 4. Purpose (Describe specific purpose and you may assign an Expenditure Code) | 5. Date | 6. Amount |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-------------------|
| Expenditure #1 Name <u>The Gazebo Banquet</u> Address <u>31104 Mound RD</u> <u>Warren, MI 48092</u> <input checked="" type="checkbox"/> Fund Raiser | Purpose: <u>Fundraiser</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | <u>4-13-06</u> Date | \$ <u>1059.00</u> |
| Expenditure #2 Name _____ Address _____ <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |
| Expenditure #3 Name _____ Address _____ <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |
| Expenditure #4 Name _____ Address _____ <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |
| Expenditure #5 Name _____ Address _____ <input type="checkbox"/> Fund Raiser | Purpose: _____ <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement | _____ Date | \$ _____ |

Subtotal this page

1059.00

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

Enter this total
on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
BUREAU OF ELECTIONS

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number

137338

2. Committee Name

C. T. E. Nicole Hawafmuh

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held

4-13-06

4. Number of Individuals Attending
or Participating (whichever is
greater)

5. Type of Fund Raising Activity

Dinner

6. Address and Name (if any) of the
place where the activity was held.

☐ Private Residence

7. Total Contributions

2090.00

8. Other Receipts

9. Gross Receipts (Add lines 7 and 8)

2090.00

10. Total Cost of Event

1659.00

(Total Cost includes In-Kind Contributions and All Expenditures Made For the Event)

11. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)

Contribution Split
(%)

Expenditure Split
(%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.